

Arizona Department of Health Services

Division of Behavioral Health Services

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Section 3.20 **Credentialing and Privileging**

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3.20.1 Introduction

The credentialing and privileging processes are an integral component of the ADHS/DBHS quality management program. The credentialing and privileging processes help to ensure that only qualified behavioral health clinicians who are capable of meeting the needs of the persons who are seeking and/or receiving behavioral health services participate in the ADHS/DBHS provider network.

The credentialing requirements differ depending on the type of clinician. All behavioral health professionals who are registered to bill independently must be credentialed prior to providing services in the ADHS/DBHS behavioral health system. Other behavioral health professionals and behavioral health technicians must be credentialed if the clinician will be conducting assessments and/or serving as a Clinical Liaison. In addition to being credentialed, any behavioral health professional or behavioral health technician who will be conducting assessments and serving as a Clinical Liaison must be privileged.

The specific requirements associated with the credentialing and privileging processes for each type of clinician are discussed below.

3.20.2 References

The following citations can serve as additional resources for this content area:

[42 CFR 438.214](#)
[A.R.S. Title 32, Chapter 33](#)
[4 A.A.C. 6](#)
[9 A.A.C. 20-101](#)
[AHCCCS/ADHS Contract](#)
[ADHS/T/RBHA Contract](#)
[ADHS/DBHS Covered Behavioral Health Services Guide](#)
[AHCCCS Medical Policy Manual, Chapter 900](#)

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[Requirements for Credentialing Practitioners Conducting Behavioral Health Assessments and Serving as Clinical Liaisons Matrix](#)
[SMI Eligibility Determination Section](#)
[Clinical Liaison Section](#)
[Intake, Assessment and Service Planning Section](#)

3.20.3 Scope

To whom does this apply?

This section applies to behavioral health professionals and behavioral health technicians who are providing behavioral health services to persons in the ADHS/DBHS behavioral health system.

3.20.4 Definitions

[Behavioral Health Professional](#)

[Behavioral Health Related Field](#)

[Behavioral Health Technician](#)

[Clinical Liaison](#)

[Credentialing](#)

[Primary Source Verification](#)

[Privileging](#)

3.20.5 Did you know...?

- Accreditation by a nationally recognized accreditation organization will usually meet ADHS/DBHS credentialing standards. T/RBHAs must ensure, to the extent possible, that practitioners are not subjected to duplicative credentialing processes.
- If the T/RBHA delegates any of the credentialing/re-credentialing or selection of practitioners responsibilities, the T/RBHA must retain the right to approve, suspend, or terminate any practitioner selected and may revoke the delegated function if the delegated performance is inadequate.

3.20.6 Objectives

The objectives of the credentialing and privileging processes are to:

- Maintain fair credentialing and privileging processes in which standards are applied consistently throughout the state;
- Obtain application information about a potential clinician's background and work history;
- Verify credentials and other information (e.g., malpractice or sanction activity) with primary sources;
- Provide flexibility in the process (i.e., expedited credentialing) so that any gaps in service provider networks can be expeditiously addressed; and

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- Determine competency of credentialed clinicians who will be conducting assessments and/or serving as Clinical Liaisons.

3.20.7 Procedures

3.20.7-A. General process for credentialing and privileging

Responsible Entity. Each T/RBHA or its designee must establish credentialing and privileging processes that are in compliance with the standards set forth in this section. **[T/RBHAs describe how the standards of this section will be implemented. Include the general requirements for providers to follow and identify if the T/RBHA will be delegating functions of the credentialing and privileging process]**

Fairness of Process. The T/RBHAs or their designee shall maintain a fair credentialing and privileging process which:

- Does not discriminate against a clinician solely on the basis of the professional's license or certification; or due to the fact that the clinician serves high-risk populations and/or specializes in the treatment of costly conditions.
- Affords the clinician the right to review information gathered related to his/her credentialing application and to correct erroneous information submitted by another party.
- Notifies the clinician when the information obtained through the verification process varies substantially from what the clinician provided.
- Ensures credentialing/privileging information is kept confidential.

Additional Standards. Other standards related to the credentialing process include the following:

- The credentialing process must be in compliance with federal requirements that prohibit employment or contracts with providers excluded from participation under either Medicare or Medicaid.
- Mechanisms must be put in place to ensure that the credentialed clinicians renew licenses or certifications required by the appropriate licensing/certifying entity and continuously practice under a current and valid license/certification.
- High volume behavioral health care practitioners are subject to an initial site visit as part of the initial credentialing process.
- If an expedited or temporary credentialing process is utilized, the following minimum requirements must be met:

A practitioner must complete a signed application that must include the following items:

- Reasons for any inability to perform essential functions of the position, with or without accommodation;
- Lack of present illegal drug use;
- History of loss of license and/or felony convictions;
- History of loss or limitation of privileges or disciplinary action;
- Current malpractice insurance coverage; and
- Attestation by the applicant of the correctness and completeness of the application.

In addition, the applicant must furnish the following information:

- Minimum five year work history or total work history if less than five years; and

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- Current Drug Enforcement Agency (DEA) or Controlled Dangerous Substances (CDS) certificate.

The T/RBHA must conduct primary source verification of the following:

- Licensure or certification; and
- National Practitioner Data Bank (NPDB) query; or
- In lieu of NPDB query, all of the following:
 - Minimum five year history of professional liability claims resulting in a judgment or settlement; and
 - Disciplinary status with regulatory board or agency; and
 - Medicare/Medicaid sanctions.

The T/RBHA must ensure compliance with all applicable credentialing requirements within six months following the granting of temporary credentials. If the practitioner has not been credentialed during this six month time period, then the T/RBHA may issue a second temporary credential. All credentialing must be completed by the end of the second six-month period.

[T/RBHAs add additional standards, including timelines for completion of the credentialing process and specific procedures for consideration of temporary credentialing]

Recredentialing. The T/RBHAs or designee must ensure that all credentialed clinicians described in subsections B and C below are recredentialed. The recredentialing process must:

- Occur at least every three years;
- Update information obtained during the initial credentialing; and
- Consider any available information on the clinician's performance.

The recredentialing of individual practitioners must include a process for ongoing monitoring, and intervention if appropriate, of practitioner sanctions, complaints and quality issues, which include, at a minimum, reviews of:

- Medicare/Medicaid sanctions;
- State sanctions or limitations on licensure;
- Behavioral health recipient concerns including grievances (complaints) and appeals information; and
- Quality issues.

[T/RBHAs add here additional standards for the recredentialing process]

3.20.7-B. Credentialing requirements for practitioners who are registered by AHCCCS to bill independently

Individual practitioners who meet the AHCCCS criteria to bill independently and as such are required to register with AHCCCS must be credentialed prior to the provision of covered behavioral health services (including conducting assessments and performing the duties of clinical liaison). These practitioners include the following behavioral health professionals:

- Psychiatrists
- Physician (MD and DO)
- Psychologists
- Nurse Practitioner
- Physician Assistants

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- Independent Social Worker (only required if they will be billing independently)
- Professional Counselor (only required if they will be billing independently)
- Marriage and Family Therapists (only required if they will be billing independently)
- Licensed Independent Substance Abuse Counselor (only required if they will be billing independently)

The initial credentialing process for these clinicians must include the following components:

A written application to be completed signed and dated by the potential clinician that attests to the following elements:

- Reasons for any inability to perform essential functions of the position, with or without accommodation;
- Lack of present illegal drug use;
- If applicable, history of loss of license and/or felony convictions;
- If applicable, history of loss or limitation of privileges or disciplinary action if applicable;
- Current malpractice insurance coverage; and
- Correctness and completeness of the application.

In addition, the applicant must furnish the following:

- Minimum five year work history or total work history if less than five years; and
- Drug Enforcement Administration (DEA) or Chemical Database Service (CDS) certification as applicable.

For credentialing of physicians, nurse practitioners, physician's assistants and psychologists, verification from primary sources of:

- Licensure or certification by the appropriate state licensing board;
- Board certification if applicable or highest level of credentials attained;
- Minimum five year history (or total history if less than five years) of professional liability claims resulting in a judgment or settlement;
- National Practitioner Data Bank (NPDB) query; or, in lieu of NPDB query, all of the following must be verified:
 - Minimum five year history (or total history if less than five years) of professional liability claims resulting in judgment or settlement;
 - Disciplinary status with regulatory board or agency if applicable; and
 - Medicare/Medicaid sanctions if applicable.

For credentialing of independent masters level behavioral health therapists who are registered by AHCCCS to bill independently, verification from primary sources of:

- Licensure by the Arizona Board of Behavioral Health Examiners;
- A review of complaints received and disciplinary status through the Arizona Board of Behavioral Health Examiners;
- Minimum five year history, or total history if less than five years, of professional liability claims resulting in a judgment or settlement; and
- Medicare/Medicaid sanctions, if applicable.

3.20.7-C. Credentialing requirements for other practitioners conducting assessments/ serving as clinical liaisons.

Other Behavioral Health Professionals

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The following other licensed behavioral health professionals must be credentialed prior to performing assessments and/or serving as clinical liaisons:

- Independent Social Worker (if not registered with AHCCCS to bill independently)
- Professional Counselor (if not registered with AHCCCS to bill independently)
- Marriage and Family Therapists (if not registered with AHCCCS to bill independently)
- Masters Level Social Worker
- Bachelors Level Social Worker
- Substance Abuse Counselor
- Associate Counselor
- Associate Substance Abuse Counselor
- Associate Marriage and Family Therapist
- Registered nurse with at least one year of full-time behavioral health experience

The initial credentialing process for these clinicians must include the following components:

- A written application to be completed, signed and dated by the potential clinician that attests to the following elements:
 - Reasons for inability to perform essential functions with or without accommodations, if any;
 - Lack of present illegal drug use;
 - History of loss of certification/license;
 - History of loss or limitation of privileges or disciplinary activity;
 - Correctness and completeness of the application; and
 - Minimum five year work history or total work history if less than five years; and
 - Verification of:
 - Licensure by the Arizona Board of Behavioral Health Examiners or Board of Nursing and
 - A review of complaints received and disciplinary status through the Arizona Board of Behavioral Health Examiners or Board of Nursing.

Behavioral Health Technicians

Only certain qualified behavioral health technicians will be eligible to perform assessments and/or serve as clinical liaisons and therefore will need to be credentialed if they are to perform these functions. To be considered a qualified behavioral health technician, a person must have one of the following combinations of education, license and/or behavioral health work experience:

- Masters in a behavioral health related field;
- Bachelors in a behavioral health related field and two years behavioral health work experience;
- Masters in non-behavioral health related field and 30 semester hours in behavioral health education (see [PM Attachment 3.20.1](#)) and two years behavioral health work experience;
- Bachelors in a non-behavioral health related field and 30 semester hours in behavioral health education (see [PM Attachment 3.20.1](#)) and four years behavioral health work experience;
- Associate degree in behavioral health related field and four years behavioral health work experience;

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- Associate degree in non-behavioral health related field and 30 semester hours in behavioral health education (see [PM Attachment 3.20.1](#)) and five years behavioral health work experience; or
- Licensed Physician Assistant (who is not working as a medical practitioner) and two years of behavioral health work experience.

The initial credentialing process for these clinicians must include the following components:

A written application to be completed, signed and dated by the potential clinician that attests to the following elements:

- Reasons for inability to perform essential functions with or without accommodations, if any;
- Lack of present illegal drug use and/or felony convictions;
- For Physician Assistant, history of loss of certification/license;
- For Physician Assistant, history of loss or limitation of privileges or disciplinary action;
- Correctness and completeness of the application; and
- Minimum five year work history or total work history if less than five years.

For Physician Assistants, verification of:

- Licensure by the Arizona Board of Physician Assistants
- A review of complaints received and disciplinary status through the Arizona Board of Physician Assistants.

For non-licensed behavioral health technicians:

- Verify educational degree and
- Review of college course transcripts (See [PM Attachment 3.20.1](#)).

3.20.7-D. Privileging of practitioners conducting assessments/serving as Clinical Liaison

ADHS/DBHS requires that all clinicians who will be conducting assessments and/or serving as a clinical liaison must be privileged as well as credentialed (see subsections B and C above).

In order to be privileged the following standards must be met:

- All behavioral health professionals and behavioral health technicians must complete ADHS/DBHS designed training classes on the Arizona assessment process and the role of the clinical liaison.
- In addition all behavioral health technicians must complete an additional ADHS/DBHS designed training session on the assessment process, (e.g., mental health status exam, DSM, clinical formulation). Behavioral health technicians must also demonstrate competence by completing a minimum of three adequate assessments under the supervision of a behavioral health professional.

The behavioral health professional supervising the behavioral health technician must complete the following documentation:

- An attestation to the clinician's competencies for performing assessments and serving as a Clinical Liaison. ADHS/DBHS has developed [PM Form 3.20.1](#), which may be used to document this requirement; and
- Reporting on the behavioral health technician's case supervision. ADHS/DBHS has developed [PM Form 3.20.2](#), which may be used to document this requirement.

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[T/RBHAs attach any relevant forms]

[T/RBHAs may want to add in additional standards here depending on whether privileging is being done by T/RBHAs or by the providers]

3.20.7-E. Additional credentialing standards for hospitals and behavioral health facilities

Hospitals and behavioral health facilities (OBHL licensed Level I, II, III, outpatient clinics and ADHS/DBHS Title XIX certified community service agencies) must ensure the following:

- The provider is licensed to operate in Arizona as applicable and is in compliance with any other applicable state or federal requirements; and
- The provider is reviewed and approved by an appropriate accrediting body or if not accredited, Centers for Medicare and Medicaid Services (CMS) certification, ADHS/DBHS Title XIX certification or state licensure review may substitute for accreditation. In this case, the provider must provide a copy of the report to the contracted T/RBHA that verifies that a review was conducted and compliance was achieved.